

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CTD018800458	2. Page 1 of 2	3. Emergency Response Phone 413-313-7452	4. Manifest Tracking Number 016994031 JJK			
5. Generator's Name and Mailing Address ANACOIL, LLC P.O. BOX 1318 ROCKVILLE CT 06066 Generator's Phone: 860 871-1200			Generator's Site Address (if different than mailing address) 60 EAST MAIN STREET ROCKVILLE CT 06066					
6. Transporter 1 Company Name Western Mass Environmental, LLC			U.S. EPA ID Number MAC300010147					
7. Transporter 2 Company Name Veolia ES Technical Solutions			U.S. EPA ID Number NJD080631389					
8. Designated Facility Name and Site Address VEOLIA ES TECHNICAL SOLUTIONS, LLC 4301 INFIRMARY ROAD WEST CARROLLTON OH 45449 Facility's Phone: 937 869-6101			U.S. EPA ID Number OH093945293					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (OIL, METHYLENE CHLORIDE) 9, PGIII	001	DM	200	P	F002	
		2.						
		3.						
	4.							
14. Special Handling Instructions and Additional Information E/R - HME - Ray Marciniak								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offoror's Printed/Typed Name Richard G. Bombardieri			Signature <i>[Signature]</i>			Month Day Year 2 27 17		
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name Garry Parente			Signature <i>[Signature]</i>			Month Day Year 2 27 17	
Transporter 2 Printed/Typed Name Codie Adelineyton			Signature <i>[Signature]</i>			Month Day Year 3 1 17		
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number: _____							
	18b. Alternate Facility (or Generator)						U.S. EPA ID Number	
Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator)						Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H001		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name Brittany Blankenship			Signature <i>[Signature]</i>			Month Day Year 3 7 17		

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)		21. Generator ID Number <i>C110018800458</i>	22. Page <i>2</i>	23. Manifest Tracking Number <i>016994031 JTK</i>			
24. Generator's Name <i>Anchorit, LLC.</i>							
25. Transporter <i>3</i>	Company Name <i>Freemold Curtagge Inc</i>			U.S. EPA ID Number <i>NJ0054126164</i>			
26. Transporter _____	Company Name _____			U.S. EPA ID Number _____			
27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers		29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes	
		No.	Type				
<i>[Red diagonal line across the table]</i>							
32. Special Handling Instructions and Additional Information							
TRANSPORTER	33. Transporter <i>3</i> Acknowledgment of Receipt of Materials		Signature <i>[Signature]</i>		Month	Day	Year
	Printed/Typed Name <i>[Name]</i>				<i>03</i>	<i>03</i>	<i>17</i>
DESIGNATED FACILITY	34. Transporter _____ Acknowledgment of Receipt of Materials		Signature _____		Month	Day	Year
	Printed/Typed Name _____						
35. Discrepancy							
36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							